

## **WEBINAR SUMMARY: OPPORTUNITIES FOR CONNECTING HEALTH AND THE ENVIRONMENT**

Thursday 5th July 2018. Part of the webinar series: Partnerships for people, place and the environment.

### **CONTEXT**

The Government's 25 Year Environment Plan provides a guiding framework for improving the environment within a generation. To inform local implementation, Defra is undertaking research to understand how partnership working is taking place and to identify good practice.

The environment plays a large role in supporting health and wellbeing. This webinar featured two examples of work that put partnership working for health and the environment into practice. Dr James Szymankiewicz, GP and Chair of Devon Local Nature Partnership, talked about his experiences helping communities reconnect with the natural world to benefit people and the environment. Mark Fishpool, Director of Middlesbrough Environment City, outlined the work they do with over 150 local partners to achieve 'One Planet Living' and quality of life in Middlesbrough.

The webinar aimed to explore how in practice the Government's 25 Year Environment Plan can be implemented alongside driving better health within local communities.

This summary gives an outline of who attended, the main points of the discussion, and finally provides links to further resources.

The comments contained herein reflect the discussion by participants and not any proposed policy.

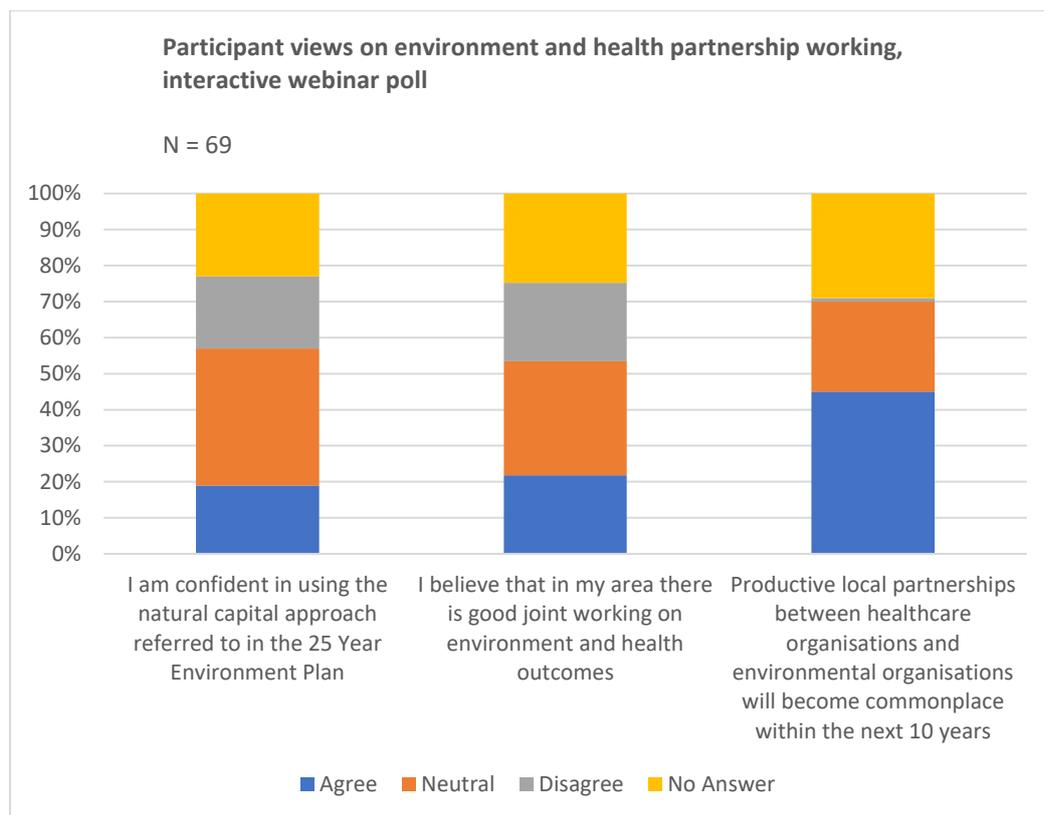
### **WHO ATTENDED**

112 people registered, and 76 people participated in the webinar. Participants spanned the public, private and third sector from across the UK, including the NHS, local and county councils, government bodies, charities, universities and environmental consultancies.

### **SUMMARY**

The webinar began with a poll to get a sense of participants' views on natural capital, joint working, and local partnership approaches. The results (see Figure 1) show that only a fifth of participants felt confident using the natural capital approach or felt that their area exemplified good joint working practices. However, there was a large appetite for change, with almost half of participants agreeing that productive local partnerships between healthcare organisations and environmental organisations will become commonplace within the next 10 years.

Figure 1



## KEY DISCUSSION POINTS

### INTEGRATION

**Our current approach to integrating public health and improving the natural environment isn't working, but there is a real opportunity to develop partnership working in this space.** We are seeing increasing health inequalities and lifestyle illnesses, at the same time as using more than our fair share of global resources and exacerbating environmental degradation. However, both speakers and participants felt that there are real opportunities to approach these intertwined issues in a joined-up way.

**Each area will need a different approach to this work.** There is no one-size-fits-all approach because different areas will have different challenges, partners, and opportunities.

**Strong personal relationships are key.** Two main discussions arose; firstly that there is often high turnover in local authorities, which makes this difficult. A key learning here is to work across departments to ensure the approach is embedded in various strategies, for example including planning, transport, environment and health. The second key learning is that all partners come to the table with their own agendas. Both speakers discussed the need to recognise this, working in a way that aligns agendas while maintaining independence and identity.

### FUNDING AND SPENDING

**Funding is a barrier to this work, but there are opportunities.** For example, a key role of the third sector in these partnerships can be leveraging funding. However, a key question remains about

funding this work at scale. There is a potential Catch-22; demonstration of effectiveness at scale is needed to lever funding, but funding is needed to demonstrate effectiveness at scale.

**Place-based budgets and care might be a solution to some of these issues.** Key strategic deliverers could be brought together to agree a strategy for a local area, directed by the Health and Wellbeing Board, that allows people to be creative about budgets and work beyond the silos of individual issues – for example, using Section 106 funding<sup>1</sup> to fund preventative care.

## CULTURE CHANGE

**For the sustainability of this work, we need a culture shift to put more money and time into preventative care.** This has been gaining traction and is commonly accepted, but the funding has not quite caught up. Culture change needs to be embedded from early on from the bottom up and the top down.

**We need to move towards a whole systems approach, not a piecemeal one.** Individuals' behaviours are influenced by complex systems, and therefore individual outcomes are difficult to achieve without a systems approach that takes into account policy, environment and social structures.

## EVIDENCE

**The evidence base around the co-benefits of action on health and the environment is growing, but there is a long way to go before it becomes the 'norm'.** There is robust evidence that naturally healthy interventions are cost effective and work, however, there remains a sense that people need to be convinced of the worth of this work. One issue is that evidence on effectiveness can be highly localised and not easily generalisable. **A key way to convince the NHS and commissioners of the need for a preventative care model is through demonstrating cost savings of this approach.** For example, cold damp homes cost the NHS £1.5 billion per year.

## FURTHER RESOURCES

### PROJECTS

#### **Connecting Actively with Nature (CAN)**

Partnership project with LNP and Active Devon aiming to connect 3000 over 55s with nature to benefit health. <https://www.explored Devon.info/news-items/connecting-actively-to-nature-project/>

#### **Devon Citizen Project**

Partnership between Devon County Council, the Clinical Commissioning Group and the voluntary sector. Focus is on groups identified in the Joint Strategic Needs Assessment – carers, those with two or more long-term conditions, and those who are socially isolated – and involves and builds on successful social prescribing projects in Devon.

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<sup>1</sup> Planning obligations, also known as Section 106 agreements (based on that section of The 1990 Town & Country Planning Act) are private agreements made between local authorities and developers and can be attached to a planning permission to make acceptable development which would otherwise be unacceptable in planning terms.

### **Middlesbrough Food Partnership**

A partnership aiming to meet the town's multiple needs using food as a vehicle. Plays a coordinating role bringing together partners and current activities, and also influences policy. Research also a role through student projects from Teesside University.

<https://www.mencity.org.uk/gm/middlesbrough-food-partnership/>

### **EVIDENCE**

**The Lancet** – Open access published peer-reviewed papers

<https://www.thelancet.com/journals/lanplh/issue/current>

**Kent LNP** *Using the natural environment to deliver better health in Kent*

<http://www.kentnature.org.uk/assets/files/Health/UNEDBH-in-Kent-Final-Report.pdf>

### **Further evidence on health and environment**

- <https://ecosystemsknowledge.net/resources/resources-theme/environment-health>
- <https://planetaryhealthalliance.org/home>
- <https://www.thelancet.com/journals/lanplh/issue/current>
- <http://www.kentnature.org.uk/assets/files/Health/UNEDBH-in-Kent-Final-Report.pdf>
- <http://valuing-nature.net/news/defra-evidence-statement-links-between-natural-environments-and-human-health>
- [https://www.plymouth.ac.uk/uploads/production/document/path/10/10296/NHDS\\_final\\_report7.7.17web.pdf](https://www.plymouth.ac.uk/uploads/production/document/path/10/10296/NHDS_final_report7.7.17web.pdf)
- <https://www.waveproject.co.uk/wp-content/uploads/2018/05/Wave-Project-Evaluation-2018.pdf>